

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC		FEC IDENTIFICATION NUMBER ▼ C C00570226
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee MWPolitical, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 28 / 2020
Mailing Address 114 Karland Dr NW		Amount 7000.00
City Atlanta	State GA	Zip Code 30305-1126
Purpose of Expenditure Digital Advertising	Category/Type	Transaction ID : E20BD20ADD3E41B28FE Date of Disbursement or Obligation MM / DD / YYYY 05 / 21 / 2020
Name of Federal Candidate Perry, Scott, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 15000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee MWPolitical, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 28 / 2020
Mailing Address 114 Karland Dr NW		Amount 8000.00
City Atlanta	State GA	Zip Code 30305-1126
Purpose of Expenditure Digital Advertising	Category/Type	Transaction ID : EB4D8586875104C2A9E5 Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2020
Name of Federal Candidate Perry, Scott, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 15000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	15000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kilgore, Paul, ,
[Electronically Filed]

Date

 MM / DD / YYYY
05 / 28 / 2020

Signature